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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines New Prosperity Foundation; The 1 1 1 1 1 200 S Wacker Dr ADDRESS (number and street) Suite 4000 Check if different than previously Chicago IL 60606 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00488494 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the 02 2010 11 Election on State of 10 14 2010 22 2010 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Gregory Baise Type or Print Name of Treasurer Electronically Filed by **Gregory Baise** 07 25 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name New Prosperity Foundation; The 2010 1 0 14 2010 22 11 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 181151.06 January 1 (b) Cash on Hand at 855943.21 Begining of Reporting Period 303595.00 1830595.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1159538.21 2011746.06 6(a) and 6(c) for Column B) 1096102.92 1948310.77 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 63435.29 63435.29 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

New Prosperity Foundation; The

Report Covering the Period:

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From:

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Y Y W Y 2 0 1 0

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Y Y Y Y 2 0 1 0

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	303595.00	1830595.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	303595.00	1830595.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	303595.00	1830595.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	303595.00	1830595.00
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	303595.00	1830595.00

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Dispursements	Page 4					
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
I. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)							
(i) Federal Share	0.00	0.00					
(ii) Non-Federal Share	0.00	0.00					
(b) Other Federal Operating Expenditures	148867.41	305862.01					
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	148867.41	305862.01					
Transfers to Affiliated/Other Party Committees	0.00	0.00					
Contributions to Federal Candidates/Committeesand Other Political Committees	55000.00	55000.00					
Independent Expenditure (use Schedule E)	847235.51	1542448.76					
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00					
Loan Repayments Made	0.00	0.00					
Loans Made	0.00	0.00					
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees (such as PACs)	0.00	0.00					
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00					
. Other Disbursements	45000.00	45000.00					
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (form Cabactula LIC)							
(from Schedule H6) (i) Federal Share	0.00	0.00					
(ii) "Levin" Share	0.00	0.00					
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00					
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00					
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1096102.92	1948310.77					
. Total Federal Disbursements							
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1096102.92	1948310.77					
110111 LIIIG 01)	1030102.32	1340310.77					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	303595.00	1830595.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	303595.00	1830595.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	148867.41	305862.01
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	148867.41	305862.01

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 29 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Duncan Alexander Mailing Address PO Box 366			Date of Receipt
City Geneva FEC ID number of contributing	State IL	Zip Code 60134	Transaction ID: SA11AI.4329 Amount of Each Receipt this Period
Name of Employer	Occupation Retired	_	10000.00
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 10000.00	
Full Name (Last, First, Middle Initial) Duncan Alexander Mailing Address PO Box 366			Date of Receipt 1 0 2 7 2 0 1 0
City	State	Zip Code	Transaction ID: SA11AI.4334
Geneva	<u>IL</u>	60134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer None	Occupation Retired		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 15000.00]
Full Name (Last, First, Middle Initial) Angela J Bass	•		Date of Receipt
Mailing Address 3907 LaSalle Ct			10 20 2010
City	State	Zip Code	Transaction ID: SA11AI.4311
Floyd's Knob	<u>IL</u>	47119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50020.00
Name of Employer Self	Occupation Homema	ker	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 50020.00	
SUBTOTAL of Receipts This Page (optional)			65020.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 29 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) John Canning Mailing Address 1650 Dublin Ct			Date of Receipt
City Inverness FEC ID number of contributing	State IL	Zip Code 60067	Transaction ID: SA11AI.4307 Amount of Each Receipt this Period
federal political committee. Name of Employer Madison Dearborn Partners Receipt For:	Occupation Executive		25000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	25000.00	
David G Herro Mailing Address 65 E Goethe			Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4331
Chicago FEC ID number of contributing federal political committee.	C	60610	Amount of Each Receipt this Period 40000.00
Name of Employer Harris Associates LP	Occupation Executive		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 190000.00	
Full Name (Last, First, Middle Initial) Illinois Manufacturers			Date of Receipt
Mailing Address 1301 W 22nd St St	e 610		10 15 2010
City	State	Zip Code	Transaction ID: SA11AI.4306
Oak Brook FEC ID number of contributing federal political committee.	C	60523	Amount of Each Receipt this Period 30000.00
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 530000.00	
SUBTOTAL of Receipts This Page (optiona	J)		95000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	and Statements may not be sold or used by any personing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Steven Langman Mailing Address 1133 5th Ave City New York FEC ID number of contributing federal political committee. Name of Employer Rhone Capital LLC Receipt For: Primary General Other (specify)	State Zip Code NY 10128 C Occupation Finance Aggregate Year-to-Date 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 2 7 2 0 1 0 Transaction ID: SA11AI.4335 Amount of Each Receipt this Period 2000.00
Full Name (Last, First, Middle Initial) Maclean Fogg Company Mailing Address 1000 Allanson Ro City Mundelein FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code IL 60060 C Occupation Aggregate Year-to-Date 75000.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John McCreary Mailing Address 8042 Sequoia Ct City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Star Financial Receipt For: Primary General Other (specify)	State Zip Code IN 46240 C Occupation Banker Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	27250.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New Prosperity Foundation; The			
Α.	Full Name (Last, First, Middle Initial) Metropolitan Milwaukee Assocation of Commerce	,		Date of Receipt
	Mailing Address 756 N Milwaukee St St	te 400		10 27 4 2010
	City Milwaukee	State WI	Zip Code 53202	Transaction ID: SA11AI.4339
	FEC ID number of contributing federal political committee.	C	33202	Amount of Each Receipt this Period 18975.00
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 18975.00	
В.	Full Name (Last, First, Middle Initial) Monarch Beverage Co., Inc. Mailing Address 9347 E Pendleton Pike	<u> </u>		Date of Receipt
			7:n Codo	11 01 2010
	City Indianapolis	State IN	Zip Code 46236	Transaction ID: SA11AI.4301 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2000.00
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	
с. С.	Full Name (Last, First, Middle Initial) OTTO Engineering, Inc	1		Date of Receipt
	Mailing Address 2 E Main St			10 27 YYYY 2010
	City	State	Zip Code	Transaction ID: SA11AI.4337
	Capentersville FEC ID number of contributing federal political committee.	C	60110	Amount of Each Receipt this Period 10000.00
	Name of Employer	Occupation	า	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 10000.00	
	SUBTOTAL of Receipts This Page (optional)	1		30975.00
Ì	TOTAL This Period (last page this line number	onlv)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 29 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Raitt Mailing Address 1111 Mohawk Rd City Wilmette FEC ID number of contributing federal political committee. Name of Employer Harris & Associates, LP Receipt For: Primary General	State Zip Code IL 60091 C Occupation Finance Aggregate Year-to-Date ▼	Date of Receipt 10 26 2010 Transaction ID: SA11AI.4332 Amount of Each Receipt this Period 10000.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Shippers Rental Co Mailing Address PO Box 3156	10000.00	Date of Receipt 1 0 1 8 2 0 1 0
City Quincy FEC ID number of contributing federal political committee. Name of Employer	State Zip Code IL 62305 C Occupation	Transaction ID: SA11AI.4309 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Weaver Popcorn Mailing Address 9850 W Point Dr Ste	e 100	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Indianapolis FEC ID number of contributing	State Zip Code IN 46256	Transaction ID: SA11AI.4328 Amount of Each Receipt this Period 24350.00
Rame of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 224350.00	
		35350.00

A.

В.

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 11/29 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) New Prosperity Foundation; The Full Name (Last, First, Middle Initial) Date of Receipt Weaver Popcorn Mailing Address 9850 W Point Dr Ste 100 10 28 2010 City State Zip Code Transaction ID: SA11AI.4341 Indianapolis IN 46256 Amount of Each Receipt this Period FEC ID number of contributing 25000.00 C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date General Primary 249350.00 Other (specify) Full Name (Last, First, Middle Initial) Sam Zell Date of Receipt Mailing Address 2 N Riverside Plz Ste 600 14 2010 City State Zip Code Transaction ID: SA11AI.4304 Chicago IL 60606 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Name of Employer Equity Group Investments, Occupation Finance Receipt For:

Aggregate Year-to-Date ▼

25000.00

SUBTOTAL of Receipts This Page (optional)	•	50000.00
TOTAL This Period (last page this line number only)		303595.00

Primary

Other (specify)

General

C.

SCHEDULE B (FEC Form 3X)	Use separa		FOR LIN				R:			P	AGE	12/	29]			
TEMIZED DISBURSEMENTS		tegory of the ımmary Page		X	_	F	22 28a		23 28b	F	24 28c	F	25 29	26 30k			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										5							
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The																	
Full Name (Last, First, Middle Initial) AllianceWorks Group LLC Mailing Address 2112 W Le Moyne St							Date o		sburs	er			327 2 0 1 () ^Y	_		
City		Zip Code				Amount of Each Disbursement this Period											
Purpose of Disbursement Consultant Meeting Expenses	IL	60622			· ·							1	10.72	2			
Candidate Name					gory/ pe												
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specif	General ▼															
Full Name (Last, First, Middle Initial) AllianceWorks Group LLC							Date o		sburs	er				Y	_		
Mailing Address 2112 W Le Moyne St						10											
,		Zip Code 60622					Amou	nt o	Each	n E	Disburs	-					
Purpose of Disbursement Communications Consulting Candidate Name					man./		L.				•	100	00.00)			
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Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specif	General ▼															
Full Name (Last, First, Middle Initial)							Trans	acti	on ID	:	SB21	B.43	352		_		
AllianceWorks Group LLC							Date o		sburs	en	nent			Y			
Mailing Address 2112 W Le Moyne St							1 0		D 2	2 8	3	2	0 1 ()			
•		Zip Code 60622					Amou	nt o	Each	ı C	Disburs				_		
Purpose of Disbursement Consultant Travel Expenses												.4	13.34				
Candidate Name					gory/ pe												
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State: District:		•								_					_		
SUBTOTAL of Disbursements This Page (optional) .					<u> </u>							105	24.06				

C.

SCHEDULE B (FEC Form 3X)		ΙF	ORLIN	E NUMBER: PAGE 13/29										
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(0	check or	nly one)	/ one)									
	Detailed Summary Page	×	21b 27	22 28a	23 28b	24 28c	Н	25 29	Н	26 30b				
Any Information copied from such Reports and Statem	for the pu	rpose of	soliciting c		utions	;								
or for commercial purposes, other than using the name	e and address of any political	comm	ittee to s	solicit contr	ibutions f	rom such	comm	nittee						
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The														
Full Name (Last, First, Middle Initial) AllianceWorks Group LLC					of Disbur		B.43	55						
Mailing Address 2112 W Le Moyne St				1 1	M / D	1 5 /	ž	οťο) ^Y					
City Chicago	State Zip Code IL 60622			Amou	nt of Eac	h Disburse	-	-	-	t				
Purpose of Disbursement Communications Consulting							1000	00.00		_				
Candidate Name			egory/ vpe											
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)													
Full Name (Last, First, Middle Initial) BlueSwarm, Inc.					action II	D: SB21 sement	B.43	53						
Mailing Address 2390 El Camino Real Ste 250				M M / D D / Y Y Y O Y O Y										
•	State Zip Code CA 94306			Amou	nt of Eac	h Disburse	ement	this F	Period	t				
Purpose of Disbursement Fundraising Consulting				T L.			73	38.78						
Candidate Name			egory/ vpe											
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Capital Data Technologies				Date	of Disbur				V					
Mailing Address 3109 Cascade Dr				1 ^M 0	M / D	15	Ż	οťο)					
	State Zip Code IL 62705			Amou	nt of Eac	h Disburse			-	E				
Purpose of Disbursement Data Management Consulting					-		500	00.00		_				
Candidate Name			egory/											
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State: District:	- ·													
SUBTOTAL of Disbursements This Page (optional)			. •				1573	8.78						

C.

SCHEDULE B (FEC Form 3X)	Use sepa					E NUMBER: PAGE						14/	29	\Box			
ITEMIZED DISBURSEMENTS		category of the Summary Page		<u>`</u>	_	F	22 28a		23 28b		24 28c		25 29	26	- 1		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										5							
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The																	
Full Name (Last, First, Middle Initial) Connect Media Ventures Mailing Address 730 W Randolph St Ste 4	100						Date o		sburs				322 0 1 () ^Y	_		
City	State IL	Zip Code 60661				Amount of Each Disbursement this Period											
Purpose of Disbursement Mobile Media and Advertising	IL	00001		*								99	95.00)			
Candidate Name					egory/ vpe												
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼															
Full Name (Last, First, Middle Initial) Corporate f/x							Date o	of D	sburs	em				V	_		
Mailing Address 3601 Spanish Trace			10 M / D 1 5 / Y 2 0 1 0 Y														
,	State IL	Zip Code 62711					Amou	nt o	f Each	D	isburse	-			_		
Purpose of Disbursement Communications and Media Consulting											•	75	00.00)			
Candidate Name					egory/ /pe												
Senate President	ment For: Primary Other (spe	General cify) ▼															
State: District: Full Name (Last, First, Middle Initial)							T		ID		00041	- 4C). 		_		
Corporate f/x							Date of		sburs	em				Y			
Mailing Address 3601 Spanish Trace							1 1	╛	1	5		. 2	0 1 ()			
•	State IL	Zip Code 62711					Amou	nt o	f Each	D	isburse	-					
Purpose of Disbursement Communications and Media Consulting				U					0	-		/5	00.00	,			
Candidate Name					egory/ /pe												
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			-												
State: District:		··· •															
SUBTOTAL of Disbursements This Page (optional) .					. •							249	95.00				

C.

SCHEDULE B (FEC Form 3X)		l F	ORLIN	E NUMBE	·R·	P	AGF	15 / 2	29	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check or	nly one)						
	Detailed Summary Page		21b 27	22 28a	23 28b	24 28c	Н	25 29	Н	26 30b
Any Information copied from such Reports and Statem									;	
or for commercial purposes, other than using the name	and address of any political	comm	ittee to s	solicit contr	ibutions f	rom such	comn	nittee		
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The										
Full Name (Last, First, Middle Initial) Chris Dudley): SB21	B.43	26		
Mailing Address 3000 N Sheridan Rd #18	.D									
,	State Zip Code IL 60657			Amou	int of Eac	h Disburse	-	-		d
Purpose of Disbursement Reimburse Advanced Travel Expenses		•		L.			54	48.86		
Candidate Name			egory/ /pe							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		·							
Full Name (Last, First, Middle Initial)				Trans	aatian IT	D: SB21	D 42	E 1		
Chris Dudley				Date	of Disburs	sement				
Mailing Address 3000 N Sheridan Rd #18	·D			10	M / D	28	ž	0 i c) ^Y	
,	State Zip Code IL 60657			Amou	Amount of Each Disbursement this Period					d
Purpose of Disbursement Reimburse Advanced Travel Expenses			-				4	75.40)	
Candidate Name			egory/							
Senate President	ment For: Primary General Other (specify)	1 y	/pe							
State: District: Full Name (Last, First, Middle Initial)										
Hathaway Strategies LLC				Date	of Disburs					
Mailing Address 740 E 52nd St Ste 10				1 ^M 0	M / D	14	ž	0 1 C) ^Y	
	State Zip Code IN 46205			Amou	int of Eac	h Disburse	ement	this F	Perio	d
Purpose of Disbursement		-	•	T L.			600	00.00)	
Strategic Consulting Candidate Name	aon/									
			egory/ /pe							
Senate President	ment For: Primary General Other (specify)									
State: District:										
SUBTOTAL of Disbursements This Page (optional) .			. ▶				702	24.26		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (chook			NE NUMBER: PAGE 16 / 29 only one)									
ITEMIZED DISBURSEMENTS		category of the Summary Page		X			22 28a	\vdash	23 28b	24 28c	F	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name					persor		the pu	ırpose	of so	oliciting o		outions	
NAME OF COMMITTEE (In Full)													
New Prosperity Foundation; The													
Full Name (Last, First, Middle Initial) Hathaway Strategies LLC								of Dis	burse	SB21 ement	B.43	321	
Mailing Address 740 E 52nd St Ste 10							$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 0 & \begin{smallmatrix} M \\ \end{smallmatrix} \ \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} 0 & \begin{smallmatrix} D \\ \end{smallmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 & \begin{smallmatrix} Y \\ 1 \end{smallmatrix} 0 & \begin{smallmatrix} Y \\ \end{smallmatrix} \ \end{bmatrix}$) ^Y
•	State IN	Zip Code 46205					Amou	ınt of	Each	Disburs	-		
Purpose of Disbursement			$\overline{}$	U							60	00.00)
Strategic Consulting			Ļ										
Candidate Name				teg Гур	ory/ e								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼											
State: District:													
Full Name (Last, First, Middle Initial) Hathaway Strategies LLC							Trans Date			SB21 ement	B.43	357	
Mailing Address 740 E 52nd St Ste 10							111 M / 15 / Y 2010) ^Y		
,	State IN	Zip Code 46205					Amou	int of	Each	Disburs			
Purpose of Disbursement Communications and Media Consulting							3000.00)					
Candidate Name				teg Γyp	ory/ e								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General											
State: District:		<i>3</i> , 4											
Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC							Trans			SB21	B.43	313	
Mailing Address 45 N Hill Dr Ste 100								M /	D	D /	Y 2	010) Y
City	State VA	Zip Code 20186					Amou	ınt of	Each	Disburs	emen	t this f	Period
Purpose of Disbursement Legal Services	se of Disbursement						L.	_			104	55.25	5
Candidate Name				teg Typ	ory/								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼											
State: District:													
SUBTOTAL of Disbursements This Page (optional)					<u> </u>						194	55.25	

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OOUEDIU E D (EEO E OV)			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	c and address of any pointed		ion contributions from such committee
New Prosperity Foundation; The			
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4314
Holtzman Vogel, PLLC			Date of Disbursement
Mailing Address 45 N Hill Dr Ste 100			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & D \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix} $
City	State Zip Code		Amount of Each Disbursement this Period
Warrenton Purpose of Disbursement	VA 20186		4354.00
Legal Services			
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Holtzman Vogel, PLLC			Transaction ID: SB21B.4342 Date of Disbursement
Mailing Address 45 N Hill Dr Ste 100			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
City Warrenton	State Zip Code VA 20186		Amount of Each Disbursement this Period
Purpose of Disbursement	VA 20100		10500.00
Legal Services			
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	• · · · · · (epee)/ ↓		
Full Name (Last, First, Middle Initial) Sandra Homer			Transaction ID: SB21B.4347 Date of Disbursement
Mailing Address 236 Fiala Woods Ct			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{bmatrix} $
City Naperville	State Zip Code IL 60565		Amount of Each Disbursement this Period
Purpose of Disbursement			800.00
Communications Consulting Candidate Name		Cateman	
Gandidate Ivanie		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	71	
State: District:	<u>.</u>		
SUBTOTAL of Disbursements This Page (optional)		>	15654.00

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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s) (check			NE NUMBER: PAGE 18 / 29 only one)								29	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		_	21b 27	F	22 28a	П	23 28b	П	24 28c	П	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name				y persoi		the pu		e of s		ing co		outions	
NAME OF COMMITTEE (In Full)													
New Prosperity Foundation; The													
Full Name (Last, First, Middle Initial) Illinois State Board of Elections		Transaction ID: SB21B.4315 Date of Disbursement						_					
Mailing Address 1020 S Spring St					10 M / D 15 / Y 20 10 Y								
City Springfield	State Zip Code IL 62704					Amou	unt o	f Each	Disl	burse	-	-	Period
Purpose of Disbursement Voter File Purchase			v	.							.7	00.00)
Candidate Name				egory/ /pe									
Senate President	ement For: Primary General Other (specify) ▼	-											
State: District:													
Full Name (Last, First, Middle Initial) Magellan Data and Mapping Strategies								on ID sburs	emer				
Mailing Address 1685 Boxelder St Ste 300						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
City Louisville	State Zip Code CO 80027					Amou	unt o	f Each	Disl	burse	-		Period
Purpose of Disbursement Targeting						450.00							
Candidate Name				egory/ vpe									
Senate President	ement For: 2010 Primary X General Other (specify) ▼												
State: District:													
Full Name (Last, First, Middle Initial) Prairie State Strategies, LLC							of Di	sburs	emer				
Mailing Address 444 N Michigan Ave Ste	3600					1 ^M 0	M	^D 2	2 8 2 8	/ L	ž	0 Ĭ () ^Y
City Chicago	State Zip Code IL 60611					Amou	unt o	f Each	Disl	burse		t this I	-
Purpose of Disbursement Communications Consulting	Purpose of Disbursement										12	75.00)
Candidate Name				egory/ /pe									
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼	1											
State: District:													
SUBTOTAL of Disbursements This Page (optional)								•			242	25.00	

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ago,, 1100200000			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The			
Full Name (Last, First, Middle Initial) Jennifer Taylor			Transaction ID: SB21B.4349 Date of Disbursement
Mailing Address 728 W Jackson Apt 1109			10 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code IL 60661		Amount of Each Disbursement this Period
Purpose of Disbursement Communications Consulting			500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71	
State: District:			
Full Name (Last, First, Middle Initial) XPS Professional Services			Transaction ID: SB21B.4358 Date of Disbursement
Mailing Address 220 E Adams St Suite 200			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
,	State Zip Code IL 62701		Amount of Each Disbursement this Period
Purpose of Disbursement Media Consulting			35551.06
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) XPS Professional Services			Transaction ID: SB21B.4389 Date of Disbursement
Mailing Address 220 E Adams St Suite 200			10 M / D B / Y Y Y O Y O Y
City	State Zip Code IL 62701		Amount of Each Disbursement this Period
Purpose of Disbursement Media Consulting			17000.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		
State: District:	- V-E 2/ A		
SUBTOTAL of Disbursements This Page (optional) .)	53051.06

TOTAL This Period (last page this line number only)

148867.41

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President

District:

age# 11902000001													
SCHEDULE B (FEC Form 3X)	Use separate			OR LIN		R:				PAGE	20 /	29	
TEMIZED DISBURSEMENTS	for each cated Detailed Sum			21b 27	22 28a	X	23 28b		24		25 29		26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam												S	
NAME OF COMMITTEE (In Full) New Prosperity Foundation; The													
Full Name (Last, First, Middle Initial) AMERICAN CROSSROADS Mailing Address 1401 NEW YORK AVE	NW SUITE 120	00			Date of		isburs		ent	23.436 Y ž	4 0 1 (o ^Y	
City WASHINGTON		Code 0005			Amou	nt o	f Eacl	h D	isbu	rsemen	t this		od
Purpose of Disbursement Contribution Candidate Name			Cateo Typ	, ,		•	•	•		230	00.00	,	
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (specify)	2010 X General ▼											
Full Name (Last, First, Middle Initial) AMERICAN CROSSROADS					Date o		isburs	sem	ent	23.436	3 0 1 (Y	
Mailing Address 1401 NEW YORK AVE	NW SUITE 120	00			1 0			2 7		2	010)	
City WASHINGTON		Code 0005			Amou	nt o	f Eac	h D	isbu	rsemen			od
Purpose of Disbursement Contribution Candidate Name			Categ		<u></u>					300	00.00)	
Office Sought: House Disburs Senate	ement For:	2010 X General	Тур	e									

SUBTOTAL of Disbursements This Page (optional)	•	55000.00
TOTAL This Period (last page this line number only)	•	55000.00

Other (specify)

State:

9	CHEDULE B (FEC Form 3)	Λ	1		
	•	' Use separate schedule(s)	FOR LINE (check only	PAGE 21 / 29	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	7 22	□ 24 □ 25 □ 26
		Detailed Suffillary Fage	27	28a 28b	28c X 29 30b
	y Information copied from such Reports and for commercial purposes, other than using	•			ŭ .
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
/	New Prosperity Foundation; The				
	Full Name (Last, First, Middle Initial)			Transaction ID	: SB29.4362
	Center to Protect Patient Rights			Date of Disburs	ement
	Mailing Address PO Box 72456			1 0 / D	15 Y 2010 Y
	City Phoenix	State Zip Code AZ 85050		Amount of Each	Disbursement this Period
	Purpose of Disbursement Contribution	ſ			45000.00
	Candidate Name		Category/ Type		
	Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼			
	State: District:				

SUBTOTAL of Disbursements This Page (optional)	•	45000.00
TOTAL This Period (last page this line number only)		45000.00

ITEMIZED INDEPENDENT EXPEND	ITURES	PAGE 22 / 29 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
New Prosperity Foundation; The		C C00488494
Check if 24-hour notice 48-hour notice	е	
Full Name (Last, First, Middle, Initial) of Payee		Date
ProMedia Group, LLC		1 0 2 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4106 Reas Ln		Amount
4106 Reas LII		22000.00
City	State Zip Code	Transaction ID: SE.4215
New Albany	IN 47150	Office Sought: X House State: IN
Purpose of Expenditure	Category/ 004	Senate District: 09 Presidential
Voter Contact Mail	Type 004	T residential
Name of Federal Candidate supported or Opposed by	y expenditure:	Check One: Support X Oppose
BARON PAUL HILL		Disbursement For: Primary X General
Calendar Year-To-Date Per Election		Other (specify) :
for Office Sought	152000.00	2010
E II Nove (Los First Middle Letter) of Dece		But
Full Name (Last, First, Middle, Initial) of Payee		Date M M / D D / Y Y Y Y
ProMedia Group, LLC		1 0 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4106 Reas Ln		Amount
4100 Heas Lii		27500.00
City	State Zip Code	Transaction ID: SE.4217
New Albany	IN 47150	Office Sought: X House State: IN
Purpose of Expenditure	Category/ 004	Senate District: 09 Presidential
Advertising Producat- ion and Placement	Type 004	
Name of Federal Candidate supported or Opposed by	y expenditure:	Check One: Support X Oppose
BARON PAUL HILL		Disbursement For: Primary X General
		Other (specify) :
Calendar Year-To-Date Per Election for Office Sought	179500.00	2010
Tor Office Sought		
(a) SUBTOTAL of Itemized Independent Expenditures .		49500.00
(a, color in a management and a manageme		
(b) SUBTOTAL of Unitemized Independent Expenditure	es	
(c) TOTAL Independent Expenditures		
· · · · · · · · · · · · · · · · · · ·		
Under penalty of perjury I certify that the independent expend or at the request or suggestion of, any candidate or authorized committee) any political party committee or its agent.		
Gregory Baise	Date 07	D D Y Y Y Y 25 2011
Signature		

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 23 / 29 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER 🔻
New Prosperity Foundation; The	C C00488494
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date
XPS Professional Services	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 E Adams St	Amount
Suite 200	40419.32
City State Zip Code	Transaction ID: SE.4197
Springfield IL 62701	Office Sought: House State: IL
Purpose of Expenditure Category/ Category/	X Senate District: 00
Voter Contact Phone Program 004	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
MARK STEVEN KIRK	Disbursement For: Primary X General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	2010
F. II Nove (Leat First Middle 1979) of Power	Poli
Full Name (Last, First, Middle, Initial) of Payee	Date M M / D D / Y Y Y Y
XPS Professional Services	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 E Adams St	Amount
Suite 200	144587.86
City State Zip Code	Transaction ID: SE.4198
Springfield IL 62701	Office Sought: House State: IL
Purpose of Expenditure	X Senate District: 00
Voter Contact Mail Calegory/ Type 004	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: Support X Oppose
ALEXANDER GIANNOULIAS	Disbursement For: Primary X General
	Other (specify) :
Calendar Year-To-Date Per Election 532720.43	2010
for Office Sought	
(a) SUBTOTAL of Itemized Independent Expenditures	185007.18
(a) 502 TO THE ST NOTHER ST HOUSE HO	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
<u> </u>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
Gregory Baise Date 07	25 2011
Signature	

TEMIZED INDEPENDENT EXPE	ENDITURES	PAGE 24 / 29 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
New Prosperity Foundation; The		C C00488494
Check if 24-hour notice 48-hour	notice	U soils is.
Full Name (Last, First, Middle, Initial) of Payee		Date
XPS Professional Services		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		Amount
220 É Adams St		13080.92
Suite 200		Transaction ID: SE.4264
City	State Zip Code	Office Sought: X House State: IL
Springfield	IL 62701	Senate District: 10
Purpose of Expenditure Voter Contact Phones	Category/ Type 004	Presidential
Name of Federal Candidate supported or Oppo	sed by expenditure:	Check One: X Support Oppose
ROBERT JAMES MR. DOLD JR.		Disbursement For: Primary X General
		Other (specify) :
Calendar Year-To-Date Per Election	13080.92	2010
for Office Sought		
Full Name (Last, First, Middle, Initial) of Payee		Date
XPS Professional Services		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
Mailing Address		Amount
220 E Adams St Suite 200		10818.00
	01-1- 7- 0-1-	Transaction ID: SE.4257
City Springfield	State Zip Code IL 62701	Office Sought: X House State: IL
Purpose of Expenditure		Senate District: 10
Voter Contact Mail	Category/ Type 004	Presidential
Name of Federal Candidate supported or Oppo	sed by expenditure:	Check One: X Support Oppose
ROBERT JAMES MR. DOLD JR.		nii is Oni Va
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election	23898.92	Other (specify) : 2010
for Office Sought	20000.02	
(a) SUBTOTAL of Itemized Independent Expendit	tures	23898.92
(b) SUBTOTAL of Unitemized Independent Exper	nditures	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent or at the request or suggestion of, any candidate or aut committee) any political party committee or its agent.		
	M * M	D D Y Y Y Y
Gregory Baise	Date 0 7	25 2011
Signature		

	PAGE 25 / 29 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER
New Prosperity Foundation; The	
Ohashii ah	C C00488494
Check if 24-hour notice 48-hour notice	
Full Name (Last, First, Middle, Initial) of Payee	Date M M / D D / Y Y Y Y
XPS Professional Services	M M / D D / Y Y Y O Y O
Mailing Address	Amount
220 E Adams St	11315.15
Suite 200	Transaction ID: SE.4262
City State Zip Code	Office Sought: X House State: IL
Springfield IL 62701	Senate District: 10
Purpose of Expenditure Voter Contact Phones Category/ Type 004	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose
ROBERT JAMES MR. DOLD JR.	Disbursement For: Primary X General
Calendar Year-To-Date Per Election	Other (specify) :
for Office Sought	2010
Tot Office Sought	
Full Name (Last, First, Middle, Initial) of Payee	Date
XPS Professional Services	$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 2 & 5 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
Mailing Address	Amount
220 E Adams St	144587.86
Suite 200	Transaction ID: SE.4199
City State Zip Code Springfield IL 62701	Office Sought: House State: IL
Purpose of Expenditure	X Senate District: 00
Voter Contact Mail Category/ Type 004	Presidential
Name of Federal Candidate supported or Opposed by expenditure:	Check One: Support X Oppose
ALEXANDER GIANNOULIAS	B
	Disbursement For: Primary X General
Calendar Year-To-Date Per Election 677308.29	Other (specify) : 2010
for Office Sought	
(a) SUBTOTAL of Itemized Independent Expenditures	155903.01
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the recommittee) any political party committee or its agent.	
Gregory Baise Signature Date M M M 0 7	25 2011

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 26 / 29 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
New Prosperity Foundation; The	C C00488494			
Check if 24-hour notice 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	1,0			
Mailing Address 220 E Adams St	Amount			
Suite 200	10818.00			
City State Zip Code	Transaction ID: SE.4258			
Springfield IL 62701	Office Sought: X House State: IL			
Purpose of Expenditure Category/ Category/	Senate District: 10			
Voter Contact Mail Category Type 004	Presidential			
Name of Federal Candidate supported of Opposed by expenditure.	Check One: Support X Oppose			
DANIEL JOSEPH SEALS	Disbursement For: Primary X General			
Calendar Year-To-Date Per Election	Other (specify) :			
for Office Sought	2010			
Tot Office Godgitt				
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	10 / 25 / Y Y Y Y Y			
Mailing Address	Amount			
220 E Adams St	13524.00			
Suite 200	Transaction ID: SE.4260			
City State Zip Code Springfield IL 62701	Office Sought: X House State: IL			
Purpose of Expenditure	Senate District: 10			
Voter Contact Phones Category/ Type 004	Presidential			
	Check One: X Support Oppose			
ROBERT JAMES MR. DOLD JR.				
	Disbursement For: Primary X General			
Calendar Year-To-Date Per Election 59556.07	Other (specify) : 2010			
for Office Sought				
(a) SUBTOTAL of Itemized Independent Expenditures	24342.00			
(a) SOBTOTAL OF REMIZED INDEPENDENT Experiorations				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with,				
or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gregory Baise Date 0 7	D D Y Y Y Y Y 25 2011			
Gregory Baise Date 0.7 Signature	23 2011			

	PAGE 27 / 29 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				
New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER			
	C C00488494			
Check if 24-hour notice 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address	Amount			
220 É Adams St	18350.00			
Suite 200	Transaction ID: SE.4277			
City State Zip Code				
Springfield IL 62701	Office Sought: X House State: IN Senate District: 02			
Purpose of Expenditure TV Advertising Category/ Type 004	Presidential			
Name of Federal Candidate supported or Opposed by expenditure:	Check One: Support X Oppose			
JOSEPH SIMON MR. DONNELLY	Disbursement For: Primary X General			
	Other (specify) :			
Calendar Year-To-Date Per Election 148350.00	2010			
for Office Sought				
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	1 0			
Mailing Address	Amount			
220 E Adams St	27048.00			
Suite 200	Transaction ID: SE.4284			
City State Zip Code Springfield IL 62701	Office Sought: X House State: IL			
Purpose of Expenditure Category/ Category/	Senate District: 10 Presidential			
Voter Contact Phones Category Type 004	1 residential			
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose			
ROBERT JAMES MR. DOLD JR.	Disbursement For: Primary X General			
	.,,			
Calendar Year-To-Date Per Election 86604.07	Other (specify) : 2010			
for Office Sought				
(a) SUBTOTAL of Itemized Independent Expenditures	45398.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
O D D D D D D D D D D D D D D D D D D D	D D Y Y Y Y Y			
Gregory Baise Date 0.7	D D 25 2011			

ITEMIZED INDEPENDENT EX	PENDITURES		PAGE 28 / 29 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				
New Prosperity Foundation; The			FEC IDENTIFICATION NUMBER ▼ C C00488494	
Check if 24-hour notice 48-	hour notice		O	
Full Name (Last, First, Middle, Initial) of Pa	vee		Date	
XPS Professional Services	,		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
Mailing Address			Amount	
220 E Adams St			10331.20	
Suite 200			Transaction ID: SE.4285	
City	State Zip Code			
Springfield	IL 62701		Office Sought: X House State: IL	
Purpose of Expenditure Voter Contact Mail	Category/ Type	004	Senate District: 10 Presidential	
Name of Federal Candidate supported or C	Dpposed by expenditure:		Check One: X Support Oppose	
ROBERT JAMES MR. DOLD JR.			Disbursement For: Primary X General	
			Other (specify) :	
Calendar Year-To-Date Per Election	96935.2	7	2010	
for Office Sought		•		
Full Name (Last, First, Middle, Initial) of Pa	yee		Date	
XPS Professional Services			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
Mailing Address			Amount	
220 E Adams St			10331.20	
Suite 200			Transaction ID: SE.4287	
City	State Zip Code			
Springfield	IL 62701		Office Sought: X House State: IL Senate District: 10	
Purpose of Expenditure	Category/	004	Presidential	
Voter Contact Mail	Type	004		
Name of Federal Candidate supported or 0	Dpposed by expenditure:		Check One: Support X Oppose	
DANIEL JOSEPH SEALS			Birth W O	
			Disbursement For: Primary X General	
Calendar Year-To-Date Per Election	107266.4	7	Other (specify) : 2010	
for Office Sought	107200.4		2010	
(a) SUBTOTAL of Itemized Independent Exp	enditures		20662.40	
(b) SUBTOTAL of Unitemized Independent E	expenditures			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gregory Baise Signature	Date	M M M 0 7	D D 2 2 0 1 1 Y Y Y Y	

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 29 / 29 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
New Prosperity Foundation; The	C C00488494			
Check if 24-hour notice 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 220 E Adams St	Amount			
Suite 200	329000.00			
City State Zip Code	Transaction ID: SE.4249			
Springfield IL 62701	Office Sought: House State: IL			
Purpose of Expenditure Category/ Category/	X Senate District: 00			
Voter Contact Phones Category Type 004	Presidential			
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose			
MARK STEVEN KIRK	Disbursement For: Primary X General			
Calendar Year-To-Date Per Election	Other (specify) :			
for Office Sought	2010			
Full Name (Last, First, Middle, Initial) of Payee	Date			
XPS Professional Services	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
Mailing Address	Amount			
220 E Adams St	13524.00			
Suite 200	Transaction ID: SE.4261			
City State Zip Code Springfield IL 62701	Office Sought: X House State: IL			
Purpose of Expenditure	Senate District: 10			
Voter Contact Phones Category/ Type 004	Presidential			
Name of Federal Candidate supported or Opposed by expenditure:	Check One: X Support Oppose			
ROBERT JAMES MR. DOLD JR.				
	Disbursement For: Primary X General			
Calendar Year-To-Date Per Election 120790.47	Other (specify) : 2010			
for Office Sought				
(a) SUBTOTAL of Itemized Independent Expenditures	342524.00			
(a) SOBTOTAL of itemized independent Experiditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	847235.51			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gregory Baise Date 0.7	25 2011			
Signature				